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May 12, 2003

TO: Commissioner for
Patents
Attn: Examiner Bruce Snow
Patent Examining Corps
Facsimile Center
Washington, D.C. 20231

FROM: Nancy J. Parsons

OUR REF: 6683.26USC1
TELEPHONE: 612.336.4769

Total pages, including cover letter: 2PTO FAX NUMBER 1-703-872-9302

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Title of Document Transmitted:

Response to Restriction Requirement

Applicant:

Kohrs

Serial No.:

09/777,631

Filed:

02/06/2001

Group Art Unit:

3738

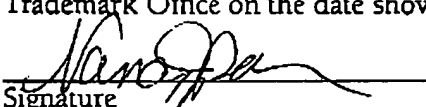
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F-681

SN 09/777,631

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kohrs Examiner: B. Snow
Serial No.: 09/777,631 Group Art Unit: 3738
Filed: February 6, 2001 Docket No.: 6683.26USC1
Title: INTERVERTEBRAL IMPLANT WITH REDUCED CONTACT AREA
AND METHOD

CERTIFICATE UNDER 37 CFR 1.8:

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Nancy J. Parsons
By: Nancy J. Parsons

RESPONSE TO RESTRICTION REQUIREMENTVIA FACSIMILE

Commissioner for Patents
Washington, D.C. 20231

TC3700
703-872-9302

Dear Sir:

This is in response to the Office Action mailed April 11, 2003. An election of one of six species, corresponding to figures 1, 6, 8, 9, 11 and 13, is required. Applicants hereby elect species 4, figure 9. Claims 1, 36-47, 49, 50, and 53-57 read on figure 9.

The Examiner is invited to contact Applicant's representative at the below-listed telephone number, if it is believed that prosecution of this application may be assisted thereby.

Respectfully submitted,

MERCHANT & GOULD P.C.
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Date: 5/12/03

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